OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



# DISCLOSURE REPORT CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) KA'AUWAI 1st Preliminary Primary (b) Committee Name: 2nd Preliminary Primary Short Form (c) Mailing Address: P.O. BOX 623 ANAHOLA 41 9670 Final Primary Preliminary General BOB 652-0732 REPORTING PERIOD (d) Phone (Bus) (Res) Final Election Period through \_\_ Treasurer's Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN A** COLUMN B ELECTION PERIOD<sup>2</sup> **TOTAL THIS PERIOD** TOTAL TO DATE Cash on Hand at the Beginning of the Election Period. 2 0 Cash on Hand at the Beginning of this Reporting Period..... 0 Total Receipts (From Line 15)..... 0 0 Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... 0 0 Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... 0 0 0 Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... 0 Total Loans at the Closing of this Reporting Period..... 7. 0 Total Unpaid Expenditures at the Closing of this Reporting Period..... 8. 0 Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 0 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... 656.25 I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge. Candidate Signature Treasurer Signature

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

#### SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(If Necessary, Complete Schedules A through E Before Completing This Section)

COLUMN A

COLUMN B **ELECTION PERIOD** 

| 18. Unpaid Expenditures Paid or Forgiven   | RECEIPTS   | TOTAL THIS PERIOD | ELECTION PERIOD<br>TOTAL TO DATE |            |
|--|--|-------------------|----------------------------------|------------|
| (ii) Monetary and Non-Monetary Contributions of \$100 or Less  | 11. Contributions From:  |                   |                                  | 11         |
| (ii) Monetary and Non-Monetary Contributions of More Than \$100  | (a) Individuals/Other Entities/Noncandidate Committees/Political Parties |                   |                                  | 11(a)      |
| (iii) Subtotal (Add Lines 11(a)(ii) and 11(a)(iii)).  (b) Candidate or Candidate's Immediate Family  (ii) Monetary and Non-Monetary Contributions of \$100 or Less.  0 0 11(a)(iii) Monetary and Non-Monetary Contributions of More Than \$100.  (iii) Subtotal (Add Lines 11(b)(ii) and 11(b)(iii)).  0 0 11(a)(iiii) Subtotal (Add Lines 11(a)(iii) and 11(b)(iiii)).  0 0 0 11(a)(iiii) 12. Total Contributions (Add Lines 11(a)(iiii) and 11(b)(iiii)).  0 0 0 11(a)(iiii) 12. Total Contributions (Add Lines 11(a)(iiii) and 11(b)(iiii)).  0 0 0 11(a)(iiii) 12. Total Contributions (Add Lines 11(a)(iiii) and 11(b)(iiii)).  0 0 0 11(a)(iiii) 12. Total Contributions (Add Lines 11(a)(iiii) and 11(b)(iiii)).  0 0 0 11(a)(iiii) 12. Total Contributions (Add Lines 12 through 14).  15. Total Receipts (Add Lines 12 through 14).  16. Expenditures.  17. Loans Repaid or Forgiven.  18. Unpaid Expenditures Paid or Forgiven.  19. Subtotal Disbursements (Add Lines 16 through 18).  0 0 12. Total Disbursements (Add Lines 19 and 20). | (i) Monetary and Non-Monetary Contributions of \$100 or Less             |                   | 0                                | 11(a)(i)   |
| (b) Candidate or Candidate's Immediate Family  (i) Monetary and Non-Monetary Contributions of \$100 or Less  | (ii) Monetary and Non-Monetary Contributions of More Than \$100          |                   | 0                                | 11(a)(ii)  |
| (ii) Monetary and Non-Monetary Contributions of \$100 or Less  | (iii) Subtotal (Add Lines 11(a)(ii) and 11(a)(iii))                      | . 0               | 0                                | 11(a)(iii) |
| (iii) Monetary and Non-Monetary Contributions of More Than \$100   | (b) Candidate or Candidate's Immediate Family                            |                   |                                  | 11(b)      |
| (iii) Subtotal (Add Lines 11(b)(ii) and 11(b)(iii)   | (i) Monetary and Non-Monetary Contributions of \$100 or Less             |                   | 0                                | 11(6)(0)   |
| 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)   | (ii) Monetary and Non-Monetary Contributions of More Than \$100          | 0                 | 0                                | 14 (b)(ii) |
| 13. Public Funds and Other Receipts  | (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))                        | 0                 | 0                                | 11(b)(iii) |
| 14. Loans  | 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)             | -0-               | -0-                              | 12         |
| 15. Total Receipts (Add Lines 12 through 14)   | 13. Public Funds and Other Receipts.                                     | 0                 | 0                                | 13         |
| DISBURSEMENTS  16. Expenditures  | 14. Loans  | 0                 | 0                                | 14         |
| 16. Expenditures   | 15. Total Receipts (Add Lines 12 through 14)                             | -o-               | -0-                              | 15         |
| 17. Loans Repaid or Forgiven   | DISBURSEMENTS  |                   |                                  |            |
| 18. Unpaid Expenditures Paid or Forgiven   | 16. Expenditures   | . 656.25          | _ 2/87.25                        | 16         |
| 19. Subtotal Disbursements (Add Lines 16 through 18)  20. Unpaid Expenditures  21. Total Disbursements (Add Lines 19 and 20)  21. Total Disbursements (Add Lines 19 and 20)  | 17. Loans Repaid or Forgiven   | 0                 | 0                                | 17         |
| 20. Unpaid Expenditures  | 18. Unpaid Expenditures Paid or Forgiven                                 | 0                 | 0                                | 18         |
| 21. Total Disbursements (Add Lines 19 and 20)  | 19. Subtotal Disbursements (Add Lines 16 through 18)                     | 0                 | 0                                | 19         |
| 21. Total Disbursements (Add Lines 19 and 20)  | 20. Unpaid Expenditures  | 0                 |                                  | 20         |
|  | 21. Total Disbursements (Add Lines 19 and 20)                            | _ 65¢ ·25         | = 2187.25                        | 21         |

| CHECK ONLY ONE BOX<br>USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW |
|--|
| INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES   |
| CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY                              |

# STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

# SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

|  |   | PAGE                               | OF   |                             |
|--|---|------------------------------------|--|-----------------------------|
| DATE OF  | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR   | FOR AGGREGATES OF \$1,000 OR MORE  | AMOUNT OF<br>CONTRIBUTION OR   |                             |
| EPOSIT OR<br>ECEIPT OF<br>I-MONETARY   |   | NAME OF EMPLOYER                   | FAIR MARKET VALUE OF NON-MONETARY  | AGGREGAT                    |
| NTRIBUTION   | IF A DEPENDENT MINOR, ENTER NAME OF PARENT  | OCCUPATION                         | CONTRIBUTION<br>THIS PERIOD  | ELECTION PER<br>TOTAL TO DA |
|  | NON-MONETARY CONTRIBUTION   |                                    |  |                             |
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## STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

#### SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

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| CANDIDATE AN              | ID CANDIDATE COMMITTEE NAME:   | PAGE   | OF   |
|---------------------------|--|--|--|
| DATE<br>OF<br>EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF<br>VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION<br>NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD  |
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|                           | NON-MONETARY CONTRIBUTION  |  | Mercrana Antono  |
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| 1. SUBTOTAL O             | 651. 25  |  |  |
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